

CITY OF HAYWARD
BENEFIT SUMMARY - EFFECTIVE 01/01/16

ITEM <small>(Some provisions do not apply to P/T Employees. Consult MOU's.)</small>	SEIU Local 1021	SEIU Local 1021	Local 21	HAME	Unrepresented	Unrepresented	POA	Police Management	Local 1909	Local 1909	Fire Chiefs	SEIU Local 1021	Unrepresented
	CLERICAL & CONFIDENTIAL	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive & UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
1. MAXIMUM MONTHLY CITY MEDICAL CONTRIBUTION (City contracts with CalPERS for Medical); please visit https://www.calpers.ca.gov/docs/2016-health-rates-bay-area.pdf for plan costs.													
PERS - One Party	\$746.47	\$746.47	\$965.37	\$914.56	\$812.94	\$914.56	\$1,033.86	\$1,016.18	\$1,033.86	\$1,016.18	\$1,016.18	\$280.00	\$711.33
PERS - Two Party	\$1,492.94	\$1,492.94	\$1,930.74	\$1,829.12	\$1,625.89	\$1,829.12	\$2,067.72	\$2,032.36	\$2,067.72	\$2,032.36	\$2,032.36		\$1,422.65
PERS - Three or More	\$1,940.82	\$1,940.82	\$2,509.97	\$2,377.86	\$2,113.66	\$2,377.86	\$2,688.04	\$2,642.07	\$2,688.04	\$2,642.07	\$2,642.07		\$1,849.45
2. MONTHLY ALTERNATIVE BENEFIT (IN LIEU OF MEDICAL CONTRIBUTIONS)													
One Party	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$210.00	\$668.63	\$150.00	\$150.00	NONE	NONE
Two Party	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$380.00	\$1,337.26	\$270.00	\$270.00		
Three or More	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$1,738.44	\$350.00	\$350.00		
3. RETIREE MEDICAL													
Retired	After 12/31/07	After 12/31/07	After 12/31/07				Hired after 5/1/2012	Hired into HPOA After 05/01/12					
Paid Directly to PERS	\$125.00	\$125.00	\$125.00	\$125.00	\$125.00	\$125.00	\$125.00	\$125.00	\$125.00	\$125.00	\$125.00		\$125.00
Reimbursed through A/P	<u>\$149.72</u>	<u>\$149.72</u>	<u>\$149.72</u>	<u>\$149.72</u>	<u>\$112.31</u>	<u>\$112.31</u>	<u>\$383.30</u>	<u>\$383.30</u>	<u>\$383.30</u>	<u>\$383.30</u>	<u>\$383.30</u>	NONE	<u>\$112.31</u>
Total Monthly Contribution	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$274.72</u>	<u>\$237.31</u>	<u>\$237.31</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>	<u>\$508.30</u>		<u>\$237.31</u>
Retired	12/30/07 & Before	12/30/07 & Before	12/30/07 & Before				Hired before 05/01/12	Hired into HPOA 05/01/12 & Before					
Paid Directly to PERS	\$125.00	\$125.00	\$125.00				\$125.00	\$125.00					
Reimbursed through A/P	<u>\$101.01</u>	<u>\$101.01</u>	<u>\$101.01</u>				<u>\$621.47</u>	<u>\$621.47</u>					
Total Monthly Contribution	<u>\$226.01</u>	<u>\$226.01</u>	<u>\$226.01</u>				<u>\$746.47**</u>	<u>\$746.47**</u>					
EE contribution													
Vesting*	10 yrs of City service- Effective 1/1/08	10 yrs of City service- Effective 1/1/08	10 yrs of City service- Effective 1/1/08	10 yrs of City service- Effective 1/1/06	NONE	NONE	10 yrs of City service- Effective 7/1/04	10 yrs of City service- Effective 1/1/03	10 yrs of City service- Effective 1/1/04	NONE	NONE	N/A	NONE
*Police - Vesting requirement does not apply to Industrial Disability Retirements. **This amount changes each year to match the Kaiser Bay Area single party rate.													
4. MAXIMUM MONTHLY CITY DENTAL CONTRIBUTION (For premiums and employee contributions, please see rate sheets)													
Delta Dental - Monthly Premium	EE only \$49.56 EE + 1 \$84.24 EE + Fam \$128.84	EE only \$49.56 EE + 1 \$84.24 EE + Fam \$128.84	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$56.95 EE + 1 \$96.82 EE + Fam \$148.08	EE only \$70.79 EE + 1 \$120.33 EE + Fam \$184.04	EE only \$71.19 EE + 1 \$121.02 EE + Fam \$185.10	EE only \$70.79 EE + 1 \$120.33 EE + Fam \$184.04	EE only \$71.19 EE + 1 \$121.02 EE + Fam \$185.10	EE only \$71.19 EE + 1 \$121.02 EE + Fam \$185.10	City Contribution prorated based on hours worked from previous month	EE only \$35.60 EE + 1 \$60.51 EE + Fam \$92.55
United Concordia - Monthly Premium	EE Only \$21.98 EE + 1 \$55.29 EE + Fam \$55.29	EE Only \$21.98 EE + 1 \$55.29 EE + Fam \$55.29	EE Only \$21.98 EE + 1 \$55.29 EE + Fam \$55.29	EE Only \$21.98 EE + 1 \$55.29 EE + Fam \$55.29	EE Only \$21.98 EE + 1 \$55.29 EE + Fam \$55.29	EE Only \$21.98 EE + 1 \$55.29 EE + Fam \$55.29	EE Only \$27.47 EE + 1 \$69.11 EE + Fam \$69.11	EE Only \$27.47 EE + 1 \$69.11 EE + Fam \$69.11	EE Only \$27.47 EE + 1 \$69.11 EE + Fam \$69.11	EE Only \$27.47 EE + 1 \$69.11 EE + Fam \$69.11	EE Only \$27.47 EE + 1 \$69.11 EE + Fam \$69.11	City Contribution prorated based on hours worked from previous month	EE Only \$13.74 EE + 1 \$34.56 EE + Fam \$34.56
5. MAXIMUM MONTHLY CITY VISION CONTRIBUTION (For premiums and employee contribution, please see rate sheets)													
Vision Service Plan (VSP) Monthly	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$4.60 EE + 1 \$9.00 EE + Fam \$14.35	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70	City Contribution prorated based on hours worked from previous month	EE only \$9.20 EE + 1 \$18.00 EE + Fam \$28.70

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ITEM <small>(Some provisions do not apply to P/T Employees. Consult MOU's.)</small>	SEIU Local 1021	SEIU Local 1021	Local 21	HAME	Unrepresented	Unrepresented	POA	Police Management	Local 1909	Local 1909	Fire Chiefs	SEIU Local 1021	Unrepresented
	CLERICAL & CONFIDENTIAL	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive & UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
6. CITY PAID LIFE INSURANCE													
Coverage	\$50,000 FT & \$25,000 PT	\$50,000 FT & \$25,000 PT	\$50,000 FT & \$25,000 PT	1 X Annual Salary	1 X Annual Salary	1 X Annual Salary	NONE	1 X Annual Salary	NONE - offered through Local 1909	1 X Annual Salary	1 X Annual Salary	\$25,000	1 X Annual Salary
CIGNA - Monthly	\$5.00 FT & \$2.50 PT	\$5.00 FT & \$2.50 PT	\$5.00 FT & \$2.50 PT	\$0.10 per \$1000/Annual Salary	\$0.10 per \$1000/Annual Salary	\$0.10 per \$1000/Annual Salary	N/A	\$0.10 per \$1000/Annual Salary	N/A	\$0.10 per \$1000/Annual Salary	\$0.10 per \$1000/Annual Salary	\$2.50	\$0.10 per \$1000/Annual Salary
7. SHORT TERM/LONG TERM DISABILITY INSURANCE													
City Provided Coverage	Clerical: NONE - Covered by SDI Confidential: 66 2/3 % of Salary	NONE - Covered by SDI	60% of Salary	66 2/3 % of Salary	66 2/3 % of Salary	66 2/3 % of Salary	NONE - Provided through POA	66 2/3 % of Salary	NONE - Provided through Local 1909	66 2/3 % of Salary	66 2/3 % of Salary	NONE	NONE
CIGNA - Monthly	Clerical: N/A Confidential: \$0.577 per \$100 of covered payroll	N/A	\$0.25 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	N/A	\$0.577 per \$100 of covered payroll	N/A	\$0.577 per \$100 of covered payroll	\$0.577 per \$100 of covered payroll	N/A	N/A
8. STATE DISABILITY INSURANCE/PAID FAMILY LEAVE INSURANCE													
Coverage	Up to \$1,104/week	Up to \$1,104/week	Up to \$1,104/week	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	Up to \$1,104/week	NONE
EDD - Per Pay Period (Employee Paid)	1% X Salary, Max Withholding \$1,104	1% X Salary, Max Withholding \$1,104	1% X Salary, Max Withholding \$1,104	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1% X Salary, Max Withholding \$1,104	N/A
9. MEDICARE - Hired After 3/31/86													
Medicare - Per Pay Period (Employee & City Paid)	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary	1.45% X Salary
*Effective 1/1/13, an additional Medicare Tax of 0.9% is applicable to wages and compensation received in excess of: Married filing joint - \$250,000; Married filing separately - \$125,000; Single/Head of Household/Qualifying widow(er) - \$200,000													
10. CITY PROVIDED EMPLOYEE ASSISTANCE PROGRAM													
# of Sessions	10	10	7	10	10	10	20	20	7	7	7	10	NONE
Holman Group - Monthly	\$6.98	\$6.98	\$5.62	\$6.98	\$6.98	\$6.98	\$5.62	\$5.62	\$5.62	\$5.62	\$5.62	\$6.98	N/A

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	CLERICAL & CONFIDENTIAL	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive & UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
11a. RETIREMENT - PERS ("Classic" Members)													
Formula	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	2.5% @ 55	3% @ 50	3% @ 50	3% @ 50	3% @ 50	3% @ 50	2.5% @ 55	2.5% @ 55, if elected to participate
CalPERS Published Employer Rate	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	42.398%	42.398%	40.397%	40.397%	40.397%	24.467%	24.467%
CalPERS Published Employee Rate	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	9.000%	9.000%	9.000%	9.000%	9.000%	8.000%	8.000%
Employer Rate (EE Paid)	1.500%	1.500%	1.000%	1.000%	1.000%	1.000%	6.000%	6.000%	6.000%	6.000%	6.000%	0.000%	0.000%
Employer Rate (City Paid)	22.967%	22.967%	23.467%	23.467%	23.467%	23.467%	36.398%	36.398%	34.397%	34.397%	34.397%	24.467%	24.467%
Employee Rate (EE paid)	8.000%	8.000%	8.000%	8.000%	8.000%	8.000%	9.000%	9.000%	9.000%	7.000%	7.000%	8.000%	8.000%
Employee Rate (City paid)	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	2.000%	2.000%	0.000%	0.000%
Total City paid PERS	22.967%	22.967%	23.467%	23.467%	23.467%	23.467%	36.398%	36.398%	34.397%	36.397%	36.397%	24.467%	24.467%
Total Employee paid PERS	9.500%	9.500%	9.000%	9.000%	9.000%	9.000%	15.000%	15.000%	15.000%	13.000%	13.000%	8.000%	8.000%
11b. RETIREMENT - PERS ("New" Members)													
Formula	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.0% @ 62	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.7% @ 57	2.0% @ 62	2.0% @ 62, if elected to participate
CalPERS Published Employer Rate	24.467%	24.467%	24.467%	24.467%	24.467%	24.467%	42.398%	42.398%	40.397%	40.397%	40.397%	24.467%	24.467%
CalPERS Published Employee Rate	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	12.750%	12.750%	11.250%	11.250%	11.250%	6.250%	6.250%
Employer Rate (EE Paid)	1.500%	1.500%	1.000%	1.000%	1.000%	1.000%	2.250%	2.250%	3.750%	3.750%	3.750%	0.000%	0.000%
Employer Rate (City Paid)	22.967%	22.967%	23.467%	23.467%	23.467%	23.467%	40.148%	40.148%	36.647%	36.647%	36.647%	24.467%	24.467%
Employee Rate (EE paid)	6.250%	6.250%	6.250%	6.250%	6.250%	6.250%	12.750%	12.750%	11.250%	9.250%	9.250%	6.250%	6.250%
Employee Rate (City paid)	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	2.000%	2.000%	0.000%	0.000%
Total City paid PERS	22.967%	22.967%	23.467%	23.467%	23.467%	23.467%	40.148%	40.148%	36.647%	38.647%	38.647%	24.467%	24.467%
Total Employee paid PERS	7.750%	7.750%	7.250%	7.250%	7.250%	7.250%	15.000%	15.000%	15.000%	13.000%	13.000%	6.250%	6.250%

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	CLERICAL & CONFIDENTIAL	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive & UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
12. HOLIDAYS & HOLIDAY PAY													
Annual - Total Days	14.5	14.5	14.5	14.5	14.5	14.5	0	0	(40 HR Positions) 14	(40 HR Positions) 14	14	58 hours	NONE
Christmas Eve - Hours	8	8	8	8	8	8	0	0	4	4	4		
New Year's Eve - Hours	4	4	4	4	4	4	0	0	4	4	4		
Pay in lieu of holiday (Public Safety Only)							6.73 % X Salary (40 hrs)	6.73 % X Salary (40 hrs)	(56 HR Positions) 5.77% X Salary (56 hrs)	(56 HR Positions) 5.77% X Salary (56 hrs)			
13. VACATION LEAVE ACCRUALS													
Annual	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 10-14 yrs - 160 hrs 15 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs	(40 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs (56 hrs) 1st yr - 169 hrs 5-14 yrs - 240 hrs 15 yrs+ - 300 hrs	(40 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs (56 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs	(40 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs (56 hrs) 1st yr - 100 hrs 5-14 yrs - 160 hrs 15 yrs+ - 200 hrs	1st yr - 80 hrs 5-9 yrs -120 hrs 10 yrs+ -160 hrs 20 yrs+ - 200 hrs * Prorated based on actual hrs worked	NONE
Vacation Usage Restrictions	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	Employees accrue but cannot use during first 6 months	N/A
14. SICK LEAVE ACCRUALS													
Annual	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	96 hrs	(40 hrs) - 103 hrs (56 hrs) - 144 hrs	(40 hrs) - 103 hrs (56 hrs) - 144 hrs	(40 hrs) - 103 hrs (56 hrs) - 144 hrs	96 hrs *Prorated based on hrs worked	NONE
Max Accumulation	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	N/A
Sick Leave Usage Restrictions	N/A	N/A	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	Employees accrue but cannot use during first 3 months	N/A
Separation Payoff*	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	Varies - 0% - 1.5% X City service years X Payrate	Varies - 0% - 1.5% X City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	1% X # City service years X Payrate	N/A
*Employee must leave in good standing. Also, employee must have 20 yrs of City service at time of separation or separate due to retirement or death. HAME and Unrepresented employees hired after 4/1/2012 are not eligible for sick leave payout upon separation.													

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	CLERICAL & CONFIDENTIAL	MAINTENANCE	PROF & TECH ENG	HAME	UNREP Executive & UNREP Non-Executive (Exempt)	UNREP Non-Executive (Non-Exempt)	POLICE	POLICE MGMT	FIRE	FIRE OFFICERS	FIRE CHIEFS	SR. & LIB PAGES (Budgeted & work 20 hrs or more)	ELECTED OFFICIALS
15. UNIFORM ALLOWANCE													
Annual	Clerical: \$275* (paid on a per pay period basis)	Up to \$250 - Safety Shoes* (paid on a per pay period basis)	\$275 - Police ID Spec* Up to \$200 - Safety Shoes* Up to \$125 - Prescription Safety Glasses*	Up to \$250 - Safety Shoes*	\$480 - Fire Chief \$440 - Police Chief (paid on a per pay period basis)	NONE	\$900 (paid on a per pay period basis)	\$900 (paid on a per pay period basis)	\$430 (paid on a per pay period basis)	\$480 (paid on a per pay period basis)	\$480 (paid on a per pay period basis)	NONE	NONE
*For specific job classifications per the MOU. (See MOU for full list of job classifications).													
16. EDUCATIONAL INCENTIVE													
Per Pay Period	NONE	NONE	NONE	NONE	NONE	NONE	2.5% - 15% depending on POST, degree, & years of service (see MOU for more information)	2.5% - 15% depending on POST, degree, & years of service (see MOU for more information)	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	2.5% - AA 5.0% - BA 7.5% perm @ 10 yrs	NONE	NONE
17. EDUCATIONAL REIMBURSEMENT													
Annual - Subject to MOU Restrictions & Limit	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	NONE	\$750	NONE	NONE	NONE	NONE	NONE
18. HEALTH AND WELLNESS REIMBURSEMENT													
Monthly Maximum	\$50.00	\$50.00	\$50.00	\$50.00	Executive: \$100.00 Exempt: \$50.00	\$50.00	NONE	\$100.00	NONE	NONE	NONE	NONE	NONE
19. PROFESSIONAL DEVELOPMENT REIMBURSEMENT													
Annual Maximum	NONE	NONE	\$250.00	\$500.00	Executive: NONE Exempt: \$500.00	\$350.00	NONE	NONE	NONE	NONE	NONE	NONE	NONE